Approved for use through 7/3/1/2008, Oki8 0551-0032

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays if valid OMB control number. Application of Doctor Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 OTHER THAN APPLICATION AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Cotumn 1) (Column 2) NUMBER FILED NUMBER EXTRA FOR RATE (\$) FEE (3) RATE (\$) FEE (\$) BASIC FEE (37 CFR 1.16(a), (b), or (c)) SEARCH FEE (37 CFR 1.16(N), (i), or (m)) **EXAMINATION FEE** (37 CFR 1.16(o), (p), or (q)) **TOTAL CLAIMS** OR (37 CFR 1.16(i)) minus 20 e INDEPENDENT CLAIMS minus 3 = (37 CFR 1.16(h)) If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each FEE (37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(i)) JOIAL TOTAL \* If the difference in column 1 is less than zero, enter "O" in column 2. APPLICATION AS AMENDED - PART II OR OTHER THAN ... (Column 2) (Column 3) SMALL ENTITY (Column 1) SMALL ENTITY CLAIMS HIGHEST PRESENT REMAINING MIMBER RATE (S) ADDI-RATE (S) ADDI-13/01 PREVIOUSLY TIONAL TIONAL v EXTRA AFTER AMENDMENT PAID FOR FEE (\$) FEE (\$) Total 23 Minus ũ 25. ×50 = (37 CFR 1.16(1) OR AMENDM Minus 100 = × 200 = 60000 OR Application Size Fee (37 CFR 1.16(s)) 180 *36*0 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160) OR TOTAL TOTAL 60000 ADD'L FEE OR ADD'L FEE (Column 2) (Column 1) (Column 3) HIGHEST CLAIMS REMAINING NUMBER PRESENT. RATE (S) ADDI-RATE (\$) ADDIlailos PREVIOUSLY PAID FOR **EXTRA** TIONA FEE (6 AFTER TIONAL FEE (S) AMENDMENT Total (37 CFR 1.15(1) Minus 28 = OR ENDM Independent (37 CFR 1.16(h)) Minus 6 - -OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE " If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3; enter "3".

The "righest Number Previously Paid For" (IN THIS SPACE is less than 1; enter "7".

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This collection of information is required by 37 CFR 1.16. The information is required to pbtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any comments on the amount of time you require to complete this form and/or suggestions for reducing his burden, should be sent to the Chief Information Officer, U.S. Patern and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.